

EXHIBIT 43-D

Medical Expenses

THE MEDICAL CENTRE
4201 TORRANCE BLVD., SUITE 390
TORRANCE, CALIFORNIA 90503
(310) 540-0018 FAX (310) 540-4988

Cash Medicare Med/M-cal ILWU GreatWest
Blue Shield Aetna Cigna HealthNet Tricare Other

PATIENT NAME (Last, First, Middle Initial)					DATE OF SERVICE		DX Description		ICD-9
#	PROCEDURE	CPT	MOD	AMT.	#		DX Description	ICD-9	
							Acute otitis media	382.00	Chronic pharyngitis 472.1
							Chronic otitis media	382.3	Acute tonsilitis 463
							Cerumen Impaction	380.4	Chronic tonsilitis 474.00
							Conductive hearing loss	389.00	Tonsillar hypertrophy 474.11
							Sensorineural hearing loss	389.10	T&A hypertrophy 474.10
							Mixed hearing loss, bilateral	389.22	Throat pain 784.1
							sensorineural hearing loss asymmetric	389.16	Dysphagia, phary/esophageal 787.24
							Unspec/perf tymp. Mem.	384.20	Sialoadenitis 527.2
							Bell's Palsy	351.0	Neck mass 784.2
							Otalgia otogenic	388.71	Thyroid nodule 241.0
							referred	388.72	Neck pain 723.1
							E tube dysfunction	381.81	Lymphadenopathy 785.6
							TMJ Syndrome	524.60	Headache/facial pain 784.0
							Cholesteatoma, UNSPEC	385.30	Cough 786.2
							Hypersomnia w/Sleep Apnea	327.23	Mouth Breathing 784.99
							Tinnitus, unspecified	388.30	Snoring 786.09
							Dizziness/Vertigo	438.85	Allergic rhinitis, UNSPEC 477.9
							peripheral	386.10	Acute rhinitis 460
							BPPV	386.11	Chronic rhinitis 472.0
							Vertigo of central origin	386.2	Deviated nasal septum 470
							Unspecified vertiginous	386.9	Nasal fracture, closed 802.0
							Giddiness	780.4	Nasal polyps 471.0
							Presbycusis	388.01	Epistaxis 784.7
							Foreign body, ear canal	931/E915	Nasal turbinate hypertrophy 478.0
							Hoarsness	784.49	Anosmia/Parosmia 781.1
							Esophagitis, unspec.	530.10	Acute pansinusitis 461.8
							Esophageal Reflux	530.81	Chronic pansinusitis 473.8
							Acute laryngitis s	464.00	Chron. ethmoid sinusitis 473.2
							Acute laryngitis c	464.01	Chron. max. sinusitis 473.0
							TVC or nodule	478.5	Allergic conjunctivitis 372.14
							Chronic laryngitis	476.0	Asthma 493.90
							Elev. Sed. Rate	790.1	Acute bronchitis 466.0
							Temporal arteritis	446.5	Stomatitis mucositis, unspec. 528.00
							Nasal obstruction	478.19	Postnasal drip 784.91
							Xerostomia	527.7	Depression Disorder 311
							Peritonsillar abscess	475	Nasal mucositis (ulcerative) 478.11
							Acute pharyngitis	462	Meniere's Disease 386.00

Other Diagnosis:

#	PROCEDURE	CPT	AMT.	#	PROCEDURE	CPT	AMT.	#	PROCEDURE	CPT	AMT.
	Fib. Laryngoscopy	31575			Imped. Tympanometry	92567			Remove impacted wax	69210	
	Rigid Scope	31231			Ped. Audiometry	92582			I & D Peritonsillar	42700	
	Fib. Nasopharyngoscopy	92511			Office P.E. tube	69433			Ant Epistaxis, simple	30901	
	Electronystagmography	92540-7			Myringotomy L/R	69420			Kenalog Inject 2cc/4cc	J3301	
	Diagnostic Audiometry	92557							Earwick/ext. canal drain	69020	

Other Procedures:

AUTHORIZATION TO PAY PHYSICIAN

(Assignment of Benefits)

I hereby authorize my insurance company to pay my insurance benefits directly to Lesley J. Luk for services rendered to me. I understand that I am financially responsible for non-covered services. I also authorize my physician to release any information required in order to process my benefits.

Date

Signature